# **Adelaide Hills Inclusive Counselling**

# **Client Service Agreement and Consent Form**

#### Aims

This document explains, in easy language, how the counselling service operates. By signing the document you indicate you understand the limits of confidentiality, and agree to the terms of service.

## **Counselling Support Service**

This Counselling Service provides counselling support for you and concerned loved ones.

#### It is NOT AN EMERGENCY OR CRISIS SERVICE.

If you have an emergency, you may contact:

ACIS for mental health support (ph. 131 465)

Suicide Callback Service (Ph. 1300 659 467)

Lifeline (131114)

Domestic Violence hotline (Ph. 1800 800 098)

or Emergency Services (000).

# Confidentiality

Your personal information will be treated as confidential. This means your personal information will be kept private and protected, except for:

- 1. Sharing with a Supervisor so they can advise on better care options
- 2. Required by a court of law
- 3. Risk of serious harm to you or another person
- 4. You have granted permission

#### Your rights

You have the right to:

- Refuse service from the counsellor
- Have access to your own records
- Have any incorrect personal information be corrected
- Make complaints and have them investigated
- Continue access to services after making a complaint

### **Complaints**

Complaints may be made:

directly to the service provider, or

to the PACFA Ethics Officer, phone: 03 9486 3077, or email: ethics@pacfa.org.au.

#### **Fees**

Fees are typically between \$60 to \$100, depending on the case.

# The Appointment

You may make an appointment by email or by phone during working hours (Monday to Friday).

# **Cancellation Policy**

Please provide at least 24 hours notification of cancellation (or you may be charged up to 50% of the fee).

Please sign below to say you understand and agree to the terms of service.

Name:	Signature:	Date:

Guardian or Parent if	Signature:	Date:
applicable:		